

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | S-2 | | 04-30-01 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | TH | 953 | 06-21-01 |
| RESPONSE FORMALITY REVIEW | unt- | 571 | 08/03/01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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4-5
6-21-01
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8-21-01